

[Signature]

Application Number: 101822 700

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total	2		2			
Total	2		5			
Total	4		11			
Total						
Claims						